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Remarks

Claims 1, 3, 5-12, 14-16, 18, 20-27, 29-33, and 35 are pending and at issue in the present application. The present amendment cancels claims 13, 28, and 34, adds claim 35, and amends claims 1, 14, 16, and 29. As an initial matter, an Advisory Action mailed on October 9, 2008, did not indicate whether Amendment B filed on September 22, 2008, was entered or not. The present amendment assumes that Amendment B was not entered and amends the claims as listed in Amendment A dated May 19, 2008.

New claim 35 incorporates the substance of original dependent claim 3 rewritten in independent form.

The applicants respectfully traverse the rejection of the claims at issue under 35 U.S.C. § 103(a) as obvious over Van Der Brug U.S. Patent No. 5,954,648 ("Van Der Brug") in view of Malackowski et al. U.S. Publication No. 2003/0093103 ("Malackowski") further in view of Iliff U.S. Publication No. 2001/0012913 ("Iliff").

The applied references do not disclose or suggest a method of determining a consequent step within a multi-step procedure comprising the steps of identifying a particular step within the multi-step procedure, identifying a component usable in the procedure, determining the consequent step within the procedure based on the identity of the component and the particular step, and automatically jumping to and displaying a representation related to the consequent step on a display unit without direct interaction between a user and a computer system, as recited by claims 1, 3, 5-12, 14, 15, and 31-33.

Further, the applied references do not disclose or suggest a system to determine a consequent step within a multi-step procedure that includes means for identifying a particular step within the multi-step procedure, means for identifying a component usable in the procedure, means for determining the consequent step within the procedure based on the identity of the component and the particular step, and means for automatically jumping to and displaying a representation related to the consequent step without direct interaction between a user and a computer system, as recited by claims 16, 18, 20-27, 29, and 30.

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Still further, the applied references do not disclose or suggest a method of determining a consequent step within a multi-step procedure comprising the steps of identifying a particular step within the multi-step procedure, identifying a component usable in the procedure, identifying a particular location of the component, determining the consequent step within the procedure based on the location, the identity of the component, and the particular step, and displaying a representation related to the consequent step on a display unit, as recited by claim 35.

Rather, Van Der Brug discloses an image guided surgery system that tracks the position of a surgical instrument in an operating area and Malackowski discloses a surgical tool system that receives data from a surgical tool that includes a handpiece and various accessories attached to the handpiece and calibrates the surgical tool system based on the data.

Further, Iliff discloses an automated disease management system that manages patient medical records, obtains health measurements from the patient, evaluates and assesses the progress of the patient's disease, reviews and adjusts therapy to optimal levels, and gives the patient medical advice for administering treatment and handling symptom flare-ups and acute episodes of the disease. See, e.g., Iliff ¶ 120. The automated disease management system includes a "Health Assessment" task that decides a next action to take for a patient, for example, refer the patient out of the system, refer the patient to a diagnostic module for diagnosis of a new symptom, or determine a next therapy step for the patient. See, e.g., Iliff ¶ 131. The "Health Assessment" task makes such decisions based on inputs from the patient, such as patient health measurements received through a dialog box of a computer application, and various algorithms that process inputs from the patient along with various tables and databases that include information relating to symptoms, treatments, patient preferences, etc.

The present Office action improperly argues that Van Der Brug and Malackowski disclose steps of or means for that are explicitly dependent on an admittedly undisclosed limitation. Specifically, the present Office action admits that Van Der Brug and Malackowski do not disclose a step of or means for identifying a particular step within a multi-step procedure and introduces Iliff to teach such limitations. See Office action pages 3 and 8. However, the examiner also argues that

Van Der Brug discloses a step of or means for identifying a component useable in the procedure and that Malackowski discloses a step of or means for determining a consequent step within the procedure based on the identity of the component and the particular step. *Id.* The applicants traverse these arguments because if Van Der Brug and Malackowski do not disclose identifying a particular step within a multi-step procedure, then it is logically impossible for such references to disclose the limitations of identifying a component or determining a consequent step because such actions would first require identification of a particular step within the procedure. Therefore, the rejection of claims 1 and 16 should be withdrawn as being premised on an untenable reasoning.

Further, Iliff does not cure these deficiencies of Van Der Brug and Malackowski. More specifically, Iliff does not disclose or suggest a step of or means for identifying a component usable in the procedure and determining a consequent step within the procedure based on the identity of the component and the particular step. Rather, Iliff discloses a disease management system that decides a next action to take for a patient based on information from the patient entered via a computer application and various algorithms.

Even if the applied references are considered in combination, there is no explanation in the pending Office action of how Van Der Brug or Malackowski can possibly disclose a step of or means for that is directly dependent on the admittedly undisclosed limitation of identifying a particular step within a multi-step procedure. Because the applied references considered alone or in combination fail to disclose or suggest each and every element specified by claims at issue, claims 1, 3, 5-12, 14-16, 18, 20-27, 29-33, and 35 are not obvious over Van Der Brug in view of Malackowski and Iliff.

In addition, none of the applied references disclose or suggest a step of or means for automatically jumping to and displaying a representation related to a determined consequent step without direct interaction between a user and a computer system. In the present Office action, the examiner incorrectly argues that Van Der Brug discloses moving to a determined consequent step by equating movement of a surgical instrument within an operating field to movement to a consequent step within a multi-step procedure. See Office action pages 7 and 12. Further, the Office action

erroneously argues that Iliff discloses a step of moving to a consequent step without direct interaction from a user (see Office action page 14), when in fact, the process of determining a next action to take for a patient in Iliff actually requires a considerable amount of direct user interaction, such as, requiring a user to interact with a computer application and enter health measurements. Claims 1 and 16 have been amended to further clarify these differences from the applied references. Consequently, the applicants respectfully request reconsideration and withdrawal of the rejection of claims 1 and 16 and allowance thereof.

In addition to the above, none of the applied references disclose or suggest a step of identifying a particular location of a component and determining a consequent step based on the location, the identity of the component, and a particular step, as recited by claim 35. In the Office action, the examiner uses Van Der Brug to teach identifying a particular location and uses Iliff to teach the step of determining a consequent step based on the location, the identity of the component, and the particular step. See Office action pages 8 and 9. However, Iliff does not include any disclosure or suggestion of determining a consequent step based on the identity and location of a component. As discussed above, Iliff does not even disclose or suggest the identification of a component, much less the identification of a location of such a component and use thereof to determine a consequent step. In fact, none of the references discloses or suggests determining a consequent step in a multi-step procedure based on a location of a component. For this additional reason, applicants respectfully request allowance of claim 35.

Referring to claims 14 and 29, in addition to the reasons provided above, none of the applied references discloses identifying a particular step within a multi-step computer controlled and directed surgical procedure. Iliff was introduced in the Office action to teach a multi-step procedure, but such procedure in Iliff is not a computer controlled and directed surgical procedure. Further, while Van Der Brug and Malackowski are generally directed to surgical procedures, neither reference discloses identifying a particular step within a multi-step computer controlled and directed surgical procedure, as required by claims 14 and 29. For this additional reason, the applicants respectfully request reconsideration and withdrawal of the rejection of claims 14 and 29 and

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allowance thereof.

For at least the above reasons, applicants respectfully request reconsideration and withdrawal of the pending rejections and allowance of all of the claims at issue. An early indication of allowance is requested.

If there are any issues remaining that can be resolved by telephone, the examiner is invited to call the undersigned.

<u>Deposit Account Authorization</u>

The Commissioner is hereby authorized to charge any deficiency in any amount enclosed or any additional fees which may be required during the pendency of this application under 37 C.F.R. §§ 1.16 or 1.17, except issue fees, to Deposit Account No. 50-1903.

Respectfully submitted,

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October 22, 2008

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